



City of Willoughby Hills
35405 Chardon Road
Willoughby Hills, OH 44094

APPLICATION FOR EMPLOYMENT

Property of the Willoughby Hills Civil Service Commission: Subject to terms and conditions.

The City of Willoughby Hills considers applicants for all positions without regard to race, color, religion, creed, sex, gender, national origin, age, ancestry, disability and/or handicap, marital or veteran status, sexual orientation or any other legally-protected status.

Applicants may request any necessary accommodations to enable them to participate in the application process.

PLEASE PRINT OR TYPE

PERSONAL INFORMATION:

Today's Date: _____

Name: _____
Last First Middle

Social Security Number: (Last 4 digits): _____

Current Address: _____

Daytime Phone Number: _____ Cell phone/Mobile: _____

Email Address: _____

If under the age of 18 a work permit (from your local school board) is required. Yes ___ No___

Have you ever previously filed an employment application with the City? ___Yes ___No

If yes, provide date(s) and position(s) applied for: _____

Have you ever previously been employed by the City? ___Yes ___No

If yes, provide dates of employment and position(s) held: _____

Do you have any relative(s) employed by the City? ___Yes ___No

If yes, list name(s), relationship(s), and position(s) within the City: _____

Are you currently employed? ___Yes ___No

Do you have a valid State of Ohio driver's license? ___Yes ___No

If yes, License Number _____

Class _____Endorsements _____

PERSONAL INFORMATION (CONTINUED):

List all addresses which you have lived or resided for the last 10 years, including dates of residence:

Address	Dates of Residence
_____	_____
_____	_____
_____	_____
_____	_____

Are you lawfully entitled to work in the United States? _____ Yes _____ No
(The Immigration Reform and Control Act of 1986 requires that employers only hire individuals who are lawfully entitled to work in the United States by virtue of being a citizen or authorized alien.) Proof of citizenship or immigration status will be required upon employment.

WORK INFORMATION:

Position you are applying for: _____

Date you can start: _____

How did you learn about the position?

Availability (Circle all that apply) Full-Time Part-Time Shift Work Temporary

If part time, specify days and hours: _____

If temporary, specify length of employment desired: _____

List any other specific days and times when you are unavailable _____

Are you willing to work overtime as necessary? _____ Yes _____ No

If not, please list specific days and times when you are unavailable _____

Can you travel, if required by this job? _____ Yes _____ No

Are you currently on lay-off status and subject to recall? _____ Yes _____ No

If yes, please explain: _____

Can you physically perform the essential functions of the position for which you are applying, without the need of reasonable accommodations (A.D.A.) for the job description? ____ Yes ____ No

If no, please explain/list reasonable accommodations you are requiring:

EMPLOYMENT HISTORY AND U.S. MILITARY EMPLOYMENT:

Instructions: Beginning with your present or most recent employer, list all employers whom you have worked for during the past. Include any job-related military service assignments, copy of discharge or current copy of military ID card or military status. Please enter all information, even when submitting a resume. *Attach additional list if necessary.*

1) Name and Address of Employer	Supervisor's Name <u>And Title</u>	Employment <u>Dates</u> Month./Year	Pay <u>History</u> \$_____ per _____
---------------------------------	---------------------------------------	-------------------------------------------	--------------------------------------------

Telephone _____ Job Title _____

Description of Job Duties: _____

Reason for Leaving: _____

May we contact for a reference? _____ Yes _____ No

2) Name and Address of Employer	Supervisor's Name <u>And Title</u>	Employment <u>Dates</u> Month./Year	Pay <u>History</u> \$_____ per _____
---------------------------------	---------------------------------------	-------------------------------------------	--------------------------------------------

Telephone _____ Job Title _____

Description of Job Duties: _____

Reason for Leaving: _____

May we contact for a reference? _____ Yes _____ No

3) Name and Address of Employer	Supervisor's Name <u>And Title</u>	Employment <u>Dates</u> Month./Year	Pay <u>History</u> \$_____ per _____
---------------------------------	---------------------------------------	-------------------------------------------	--------------------------------------------

Telephone _____ Job Title _____

Description of Job Duties: _____

Reason for Leaving: _____

May we contact for a reference? _____ Yes _____ No

EMPLOYMENT HISTORY (CONTINUED):

Please answer the following questions for all current, past employers and U.S. military service.

Within the past years:

Have you ever been disciplined or discharged (or resigned in lieu of discharge) for poor job performance? ____Yes ____No If yes, please explain: _____

Have you ever been disciplined or discharged (or resigned in lieu of discharge) for theft or a related offense? ____Yes ____No If yes, please explain: _____

Have you ever been disciplined or discharged (or resigned in lieu of discharge) for fighting, assault or related behavior? ____Yes ____No If yes, please explain: _____

Have you ever been disciplined or discharged (or resigned in lieu of discharge) for insubordination? ____Yes ____No If yes, please explain: _____

Have you ever been disciplined or discharged (or resigned in lieu of discharge) for violating safety rules? ____Yes ____No If yes, please explain: _____

Have you ever been disciplined (or resigned in lieu of discharge) for being under the influence of alcohol or drugs, or for possession, sale, use or abuse of alcohol or drugs, or for violating your company's substance abuse policy? ____Yes ____No If yes, please explain: _____

EDUCATION:

High School Attended, GED or equivalent _____
Dates Attended _____ Diploma Received? _____Yes ____No

College Attended _____
Dates Attended _____ Degree Received _____
Course of Study _____

College Attended _____
Dates Attended _____ Degree Received _____
Course of Study _____

Trade School Attended _____
Dates Attended _____ Degree Received _____
Course of Study _____

Please list any scholastic honors, awards, subjects of special study, research, publications, and/or thesis:

ADDITIONAL SKILLS:

Personal Computer Skills:

Please list all software applications you are proficient in:

Indicate any foreign languages you can speak, read and/or write:

Please describe any specialized training, apprenticeships, and/or skills that you possess that you believe are relevant to the position you are applying for (attach additional sheet if necessary):

CERTIFICATIONS OR LICENSES:

Please list any certifications or State of Ohio licenses that you possess. **Please attach photo copies to this application at this time.** You will be required to provide original certificates and licenses for verification as part of the employment process.

PROFESSIONAL ASSOCIATIONS:

Please list any professional trade business or civic activities and offices held. You may exclude membership or activities which would reveal race, color, religion, creed, sex, gender, national origin, age, ancestry, disability and/or handicap, or any other legally protected status:

REFERENCES:

Please provide five references, to include both personal and business references (excluding relatives):

	Name and Address	How they know you/ Relationship?
1.	<hr/> <hr/>	<hr/> Phone: <hr/>
2.	<hr/> <hr/>	<hr/> Phone: <hr/>
3.	<hr/> <hr/>	<hr/> Phone: <hr/>
4.	<hr/> <hr/>	<hr/> Phone: <hr/>
5.	<hr/> <hr/>	<hr/> Phone: <hr/>

APPLICANT'S PRE-EMPLOYMENT STATEMENT, AUTHORIZATION, AND RELEASE

Please read the following statements carefully and sign below:

In consideration of the acceptance of my application for employment by the City of Willoughby Hills (hereinafter referred to as "City,"), I understand, agree, and/or certify to the following:

1. I certify that all information I have provided on this application is true, accurate, and complete to the best of my knowledge and belief. I understand that falsification, misrepresentation or omission of any information on my application (including any supplemental questionnaire), resume, or any other materials, or during any interviews, will be justification for withdrawing any offer of employment or, if employed, termination from employment, regardless when the falsification, misrepresentation or omission is discovered by the City.
2. Any offer of employment I may receive from the City is contingent upon satisfactory results from the City's total pre-employment screening process. These results may include, but not be limited to the following:
 - a. Receipt by the City of references that is considers satisfactory;
 - b. Satisfactory completion of a post-offer, pre-employment medical examination that is job related and consistent with business necessity;
 - c. Passing a screening for alcohol and/or drugs;
 - d. Satisfactory completion of any pre-employment psychological examination/screening that the City may require that is job related and consistent with business necessity;
 - e. Satisfactory completion of any physical/mental skills testing or evaluation that the City may require that is job related and consistent with business necessity; and
 - f. Satisfactory completion of criminal history and background investigations.
3. I authorize the City and its agents to conduct a criminal history investigation with any or all federal, state, and local jurisdictions. This investigation may seek information on any felony and misdemeanor convictions I may have and my driving record.
4. I understand and agree that applicants for positions in the Division of Police and Division of Fire, and at the City's discretion, applicants for any other position in the City, will be subject to a more extensive background investigation. This investigation may include, but not be limited to, information as to my moral character and habits, general reputation, personal characteristics, and mode of living. This investigation may be conducted by the City's Division of Police or other agents of the City and may include interviews with my friends, neighbors, and associates. I hereby release the City and its agents, including employees of the Division of Police, my friends, neighbors, and associates, and all other parties from any and all liability for damages arising from the conduct of this investigation, and the release of information as a result thereof.
5. I hereby grant the City and its agents, permission to contact all of my present and former employers, and those individuals I have provided as personal references (unless otherwise specified on this application). I authorize and request that such employers and references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications of reemployment. Further, I authorize the City and its agents to obtain transcripts from all educational institutions I have attended. I also grant the City and its agents, permission to conduct whatever investigation which may be needed to obtain or verify information regarding statements contained in my application, resume, any other materials, or any interviews, or concerning my qualifications for employment. I hereby release the City and its agents, my present and former employers, my personal references, and all other parties from any and all liability for damages arising from furnishing the requested information.
6. This application is subject to the Civil Service Rules of the City Charter, as applicable. **Job classifications in the City do not necessarily reflect State of Ohio guidelines for classified service and may, by City Charter, be included as an unclassified position.**
7. This application shall be maintained on file for a period of at least one year.

Applicant's Notarized Signature

Date

State of Ohio
County of Lake

I hereby acknowledge and certify that _____ appeared before me, a
Notary Public, on _____ in _____, Ohio.

Notary Public

Commission Expiration Date